Healthy Child Care
NEWSLETTER

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Managing Head Lice - *Fact and Fiction*

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Unfortunately, a common occurrence among preschool and early elementary aged children is an infestation with head lice. This article will provide information about head lice, how to recognize that someone has them, and treatment recommendations.

FACTS: Head lice are small parasites that can live on the scalp and hairs of human hosts. They can be found anywhere in the hair, but most often are found behind the ears and near the neckline at the back of the neck. They do NOT have wings, CANNOT hop and CANNOT fly. They are transmitted by head to head (direct) contact with a person who has live lice, most often in the home environment (friends/family, sleepovers, camping). According to the Centers for Disease Control and Prevention (CDC), transmission from hats, combs, pillows, etc. is possible, but less likely. Lice require a human blood meal in order to grow, develop and lay eggs. Lice cannot survive more than a day without a blood meal, and cannot survive much longer than that at room temperature. Only LIVING lice can be transmitted from person to person. Nits cannot be passed to someone else.

SYMPTOMS: Head lice can be difficult to detect. Some children may experience itching or irritation to the scalp from bites, but can show no symptoms.

WHAT TO LOOK FOR: Nits are the oval shaped lice eggs the adult female lays on the hair shaft close to the scalp. Nits take 8 to 12 days to hatch. Once a nit has hatched or dies, it will remain on the hair shaft, but will not produce another

louse. Some non-aerosol hairsprays can stick to hair in droplets that look like nits but are not. If you can remove them easily, they are likely not nits. Adult lice are about the size of a sesame seed, and tan or grayish in color. A person infested with adult lice may only have a dozen or fewer active live lice on them at any time. Adult lice die within a day once they are off the head of the host.

TREATMENT: Treatment is only recommended for persons with live lice or viable nits. Nits further than ¼ inch from the head are not likely to still be viable, and do not necessarily mean the person is infested. If over the counter pediculocides (shampoos containing chemicals to kill lice)

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are used, directions should be followed exactly. These are serious chemicals and should not be overused, especially on young children. A second treatment may be needed in 10 – 14 days. If after this treatment lice are still present, a primary care physician should be consulted. Nits won't just fall off after treatment, so combing hair with a nit comb or removing nits with fingernails is recommended to remove all nits after treatment. Continue combing for two weeks until no live lice are discovered.

FICTION: Lice do not discriminate among socioeconomic groups, so it isn't just people of lower socioeconomic groups that have them. Lice do not jump --direct head to head contact is required to spread them. Alternative treatments such as petroleum jelly, mayonnaise, herbal oils and enzyme-based products have no scientific evidence to support that they are effective.

ADDITIONAL INFORMATION: Complete guidelines for treating head lice and recommendations on supplemental measures (such as household cleaning and laundering) can be found on the CDC website at: www.cdc.gov/parasites/lice/head/treatment.html. The most important thing to remember is to treat head lice based on the scientific evidence, and not fear or hysteria!

A clock hour training for one hour is available through your local health department if they participate in the Child Care Health Consultant Program.

Coming Soon!
ONLINE COMPLAINT REPORTS

The Section for Child Care Regulation (SCCR) is in the process of making substantiated complaint reports available online through the Show Me Child Care Provider Search for regulated child care facilities. Pilot projects are anticipated to begin Summer 2015 in each district. The project is expected to be completed and placed online in Fall 2015. As a result of online complaint reports:

- The public will be able to review substantiated complaints for your facility.
- As a regulated child care provider, you will be provided an opportunity to comment on the substantiated rule violations identified in the complaint. The complaint comment process is similar to the inspection comment process. Information on how to make comments is available in the informational training called "Show Me Child Care Portal Training" accessible through our website.

The SCCR asks for your patience as we work through this implementation of the online complaint reports. SCCR will provide an update prior to the official launch online.

Spring Cleaning
Remember Poison Prevention!

As you begin spring cleaning, follow these simple tips to keep children safe:
Keep all poisons in a secure location that is inaccessible to children.

- Store poisons in their original containers. Do not use food containers to store household cleaners and other chemicals or products.
- Store chemicals away from food.
- Read the directions for the use of products and their disposal before using them. Follow the advice carefully and never mix chemicals, household cleaners, or detergents or a poisonous gas may be created.
- Turn on fans and open windows when using chemicals or household cleaners. Never sniff containers to see what is inside.
- When spraying chemicals, direct the nozzle away from people and pets.
- Even in small amounts, windshield wiper fluid is poisonous. If swallowed, it can cause blindness or death to people and pets. Use it carefully to avoid spraying it in someone's face.
- Drain openers, toilet cleaners, rust removers and oven cleaners can cause serious chemical burns so use protective gloves with these products.
- Liquids made from petroleum, such as gasoline, kerosene, charcoal lighter fluid, paint thinner, baby oil, lamp oil and furniture polish, are poisonous. If these items are swallowed, they can easily get into the lungs. Even a small amount can cause breathing problems. The liquid coats the inside of the lungs and prevents oxygen from entering the blood stream.

For additional Poison Prevention information, contact the U.S. Department of Health and Human Services website at: www.poisonhelp.hrsa.gov.

Your Questions Answered About the Child Care/Preschool Immunization Status Report

Lynelle Paro, Bureau of Immunization Assessment and Assurance, Missouri Departement of Health and Senior Services

The annual Child Care/Preschool Immunization Status Report was mailed in December 2015. The report is required to be returned to the Bureau of Immunization Assessment and Assurance by January 15 each year. This is a requirement, as outlined in the Day Care Immunization Rule, 10 CSR 20-28.040. If you have not already completed and submitted the report, it is important that the report is submitted immediately. Below are some frequently asked questions about the status report, and how to complete the form:

Q. Who can I contact for assistance if I have questions when completing my day care report?
A. The immunization quality improvement manager in your area is available for assistance. You may also contact the child care health consultant at your local public health agency to assist you with both the preparation of the report and with developing a system for keeping immunization records up to date.

Q. I operate an unlicensed church-owned day care center. Is it necessary for me to complete the immunization status report?
A. Yes, statute states "As mandated by section 210.003, RSMo, the administrator of each public, private or parochial day care center, preschool or nursery school caring for ten (10) or more children shall have a record prepared showing the immunization status of every child enrolled in or attending a facility under the administrator's jurisdiction."

Q. If I care for less than 10 children, must I complete and return this Immunization Status Report?
A. Yes, this report must be returned even if you care for less than 10 children. If the Department does not receive your report, you will be considered non-compliant. However, if you have less than 10 children enrolled, you will only need to check the area that indicates you have less than 10 children and not complete the whole report.

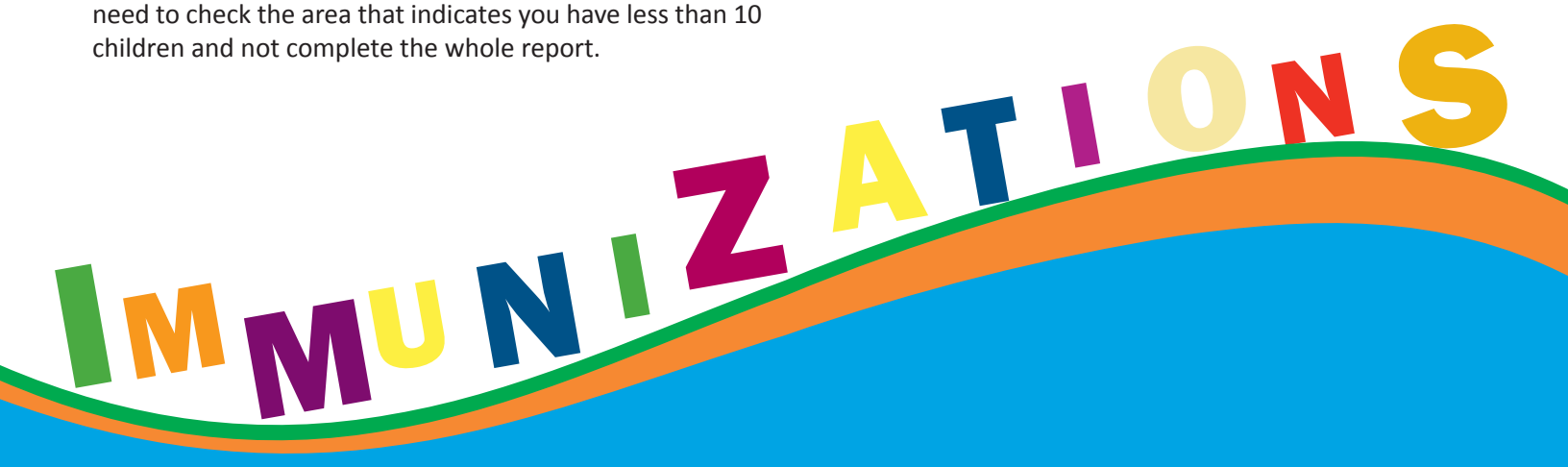
Q. Do children that are related to me count toward the 10 or more children?
A. Yes, the day care rule (for immunizations) does not differentiate between those children that are or are not related to the day care operator. All children are counted toward the total number of children enrolled.

Q. Do I have to count my "before and after" school children?
A. No, school children fall under the school statute and are reported by the school they attend.

Q. What is the best way to ensure that I have all necessary information from parents when they have their children immunized?
A. Develop a system to periodically review the immunization records of children attending your facility and if the child is due for a shot, send a note to the parents. Request a copy of the updated immunization record from parent or physician when the immunizations are given.

Q. I have lost or misplaced my Child Care Immunization Status report. How can I obtain another copy?
A. The current Child Care/Preschool Immunization Report, along with the cover letter and instructions to complete the report, can be found at: http://health.mo.gov/immunizations/daycarerequirements.php, or you may contact the Bureau of Immunization Assessment and Assurance at (573) 751-6124 to obtain a copy.

Q. Can the report be filled out and submitted electronically?
A. Yes, the report can be filled out and submitted electronically. You may report online by going to: http://health.mo.gov/immunizations/daycarerequirements.php and select the current years Online Reporting below Child Care/Preschool Reporting Information.



Lactation Support Mini-Grant

The Missouri Breastfeeding Friendly Worksite Program is a state-wide initiative to increase employer support for breastfeeding mothers. http://health.mo.gov/living/families/wic/breastfeeding/support.php. The Missouri Department of Health and Senior Services (DHSS) is offering up to $500 to a limited number of Missouri employers to create or improve their lactation support policies and programs.

For example, funds may be used on:

- Locks on doors
- Privacy screens/partitions
- Comfortable chair
- Signs
- Table or other flat surface to hold a breast pump

To be eligible to receive a mini-grant, the employer must submit their breastfeeding support policy which must be in compliance with the breastfeeding support requirements from the Fair Labor Standards Act (FLSA). To apply, complete the attached application and budget, and submit to karla.voss@health.mo.gov. Funds may not be awarded until Fall 2015. Contact Karla Voss at 573.522.2820 with any questions.

Missouri Breastfeeding Friendly Child Care

Apply Now!

Breastfeeding Friendly Child Care

DHSS invites you to apply for recognition as a Missouri Breastfeeding Friendly Child Care. This award is the state's newest recognition guidelines, similar to Eat Smart and MOve Smart guidelines for child care. If awarded, your facility's name will be placed on our recognition list on the DHSS website at http://health.mo.gov/breastfeedingfriendlychildcare in addition to receiving a framed certificate and window cling. Meeting these guidelines can be a marketing tool to promote to potential clients.

Requirements for a Breastfeeding Friendly Child Care Facility:

1. Has a written policy that reflects their support of breastfeeding.
2. Provides a welcoming environment for breastfeeding families.
3. Offers breastfeeding resources to parents.
4. Feeds infants on demand and communicates with moms about feeding preferences.
5. Trains staff to support breastfeeding parents.

Go to http://health.mo.gov/breastfeedingfriendlychildcare to apply for the award.

EXCITING BENEFITS FOR YOUR CENTER

Why Become a Breastfeeding Friendly Child Care?

- Will make your facility more attractive to new families.
- Will support mothers who have made the commitment to breastfeed.
- Will improve the overall health of infants in your care.

Supporting breastfeeding is not only good for moms and babies, but is good for business!

Click here to order this bookmark.

Unsafe Products, and How to Obtain Recall Information

The U.S. Consumer Product Safety Commission (CPSC) is an independent federal regulatory agency that works to reduce the risk of injuries and deaths from consumer products. The CPSC issues approximately 300 product recalls each year, including many products found in child care settings. Many consumers do not know about the recalls and continue to use potentially unsafe products. As a result, used products may be lent or given to a charity, relatives or neighbors or sold at garage sales or secondhand stores. You can help by not accepting, buying, lending or selling recalled products. You can contact the CPSC to find out whether products have been recalled and, if so, what you should do with them. If you have products that you wish to donate or sell and you have lost the original packaging, contact the CPSC for product information. It is the responsibility of child care providers to ensure that recalled products are not in use in their facilities.

The CPSC's toll-free hotline is available at 800.638.2772. The hearing impaired can call 800.638.8270. Information also is available on the CPSC website at: www.cpsc.gov.

This quarter we are highlighting a product that has recently been recalled and is commonly found in child care facilities.

Graco Recalls 11 Models of Strollers Due to Fingertip Amputation Hazard

Recall Details

Hazard:

Graco has received 11 reports of finger injuries including six reports of fingertip amputation, four reports of partial-fingertip amputation and one finger laceration.

Recall Details

This recall includes eleven Graco and Century-branded strollers with model names Aspen, Breeze, Capri, Cirrus, Glider, Kite, LiteRider, Sierra, Solara, Sterling and TravelMate. All models are a single-occupant stroller with an external sliding fold-lock hinge on each side and a one-hand fold release mechanism on the handle. Strollers with a manufacture date from August 1, 2000 to September 25, 2014 are included in the recall. Model numbers and the date of manufacture are printed on the white label located at the bottom of the stroller leg just above the rear wheel. For model numbers and additional details, go to: www.cpsc.gov/en/Recalls/2015/Graco-Recalls-11-Models-of-Strollers/#remedy and click on details.

Units

About 4.7 million in United States, about 202,000 in Canada, and about 10,300 in Mexico

Sold at

Target, Toys R Us, Walmart and other retail stores nationwide and online at Amazon.com, Walmart.com and other online retailers from August 2000 through November 2014 for about $40-70 for the stroller and about $140-$170 for the Travel System.

Remedy

Contact Graco immediately for a free repair kit. Repair kits will be available from the firm at the beginning of December 2014. While waiting for a repair kit, caregivers should exercise extreme care when unfolding the stroller to be certain that the hinges are firmly locked before placing a child in the stroller. Caregivers are advised to immediately remove the child from a stroller that begins to fold to keep their fingers from the side hinge area.

Kidde Recalls Disposable Plastic Fire Extinguishers Due to Failure to Discharge

The Kidde Zytel disposable fire extinguishers can fail to fully discharge during a fire emergency, posing a risk of injury to the consumer.

Recall date: February 12, 2015 **Recall number:** 15-079

Recall Summary

Name of product: Kidde plastic valve disposable fire extinguishers

Hazard: A faulty valve component can cause the disposable fire extinguishers not to fully discharge when the lever is repeatedly pressed and released during a fire emergency, posing a risk of injury.

Remedy:
Replace

Consumer Contact:
Kidde toll-free at (855) 283-7991 from 8 a.m. to 5 p.m. ET Monday through Friday, or online at www.kidde.com and click on Safety Notice for more information.
Report an Incident Involving this Product

Units
About 4.6 million units in the U.S. and 175,000 in Canada

Description
This recall involves 31 models of Kidde disposable fire extinguishers with Zytel® black plastic valves. The recalled extinguishers are red, white or silver and are either ABC or BC rated. The ratings can be found to the right of the nameplate. Manufacture dates included in the recall are July 23, 2013 through October 15, 2014. A 10-digit date code is stamped on the side of the cylinder, near the bottom. Digits five through nine represent the day and year of manufacture in DDDYY format. Date codes for recalled units manufactured in 2013 are XXXX 20413 X through XXXX 36513 X and 2014 are XXXX 00114 X through XXXX 28814 X. A nameplate affixed to the front of the fire extinguisher has one of the following model numbers:
10BC, 1A 10BC, 1A 10BCW, 2A10BC, 5BC, 5BCW, FA10G, FA110, FA5B, FC10, FC110, FC5, FH/ RESSP ,FX10 ,FX10BC, FX10K, FX210, FX210R, FX210W, FX340GW, FX340SC, FX5II, KFH Twin, M110 Twin, M5 Twin, Mariner 10, Mariner 110, Mariner 5, Mariner 5 G, RESSP, XL 5MR

Incidents/Injuries
Kidde has received 11 reports of the recalled fire extinguishers failing to discharge as expected. No injuries have been reported.

Remedy
Consumers should immediately contact Kidde for a replacement fire extinguisher.

Sold at
Home Depot, Menards, Walmart and other department, home and hardware stores nationwide, and online from August 2013 through November 2014 for between $18 and $65, and about $200 for model XL 5MR.

Importer(s)
Walter Kidde Portable Equipment Company Inc., of Mebane, North Carolina

Manufactured in
Mexico
The U.S. Consumer Product Safety Commission is charged with protecting the public from unreasonable risks of injury or death associated with the use of thousands of types of consumer products under the agency's jurisdiction. Deaths, injuries, and property damage from consumer product incidents cost the nation more than $1 trillion annually. CPSC is committed to protecting consumers and families from products that pose a fire, electrical, chemical or mechanical hazard. CPSC's work to help ensure the safety of consumer products - such as toys, cribs, power tools, cigarette lighters and household chemicals -– contributed to a decline in the rate of deaths and injuries associated with consumer products over the past 40 years. Federal law bars any person from selling products subject to a publicly-announced voluntary recall by a manufacturer or a mandatory recall ordered by the Commission.

UPDATED Clock Hour Training Information for Trainers and Providers

Child care trainers and providers can find an abundance of NEW training information on the Section for Child Care Regulation website at: health.mo.gov/safety/childcare.

The Trainer Information link describes clock hour training requirements and the training approval process. Trainers can download step-by-step instruction sheets to assist with navigating the approval process. There are special instructions for First Aid and CPR trainers to simplify the process for those providing certification through one of the endorsed agencies. All clock hour training must be approved through the Missouri Workshop Calendar, so it is important that trainers who wish to offer clock hours are aware of and agree to complete the process before offering clock hour training.

The Training link provides detailed information about clock hour training requirements, the clock hour training review process, the Toolbox, and the Missouri Professional Development Registry. On this page, providers can download important documents, such as:

- First Aid and CPR Training Information for Providers
- 2014 – 2015 Clock Hour Review Checklist
- Sample College Coursework List
- Toolbox: Adding Staff MOPD IDs to a DVN

Check out the Trainer Information and Training links to get answers to all of your clock hour training questions!

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This publication provides topical information regarding young children who are cared for in child care settings. We encourage child care providers to make this publication available to parents of children in care or to provide them with the Web address: health.mo.gov/safety/childcare/newsletters.php so they can print their own copy.

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Alternate forms of this publication for persons with disabilities may be obtained by contacting the Missouri Department of Health and Senior Services, Section for Child Care Regulation, P.O. Box 570, Jefferson City, MO, 65102, 573.751.2450. Hearing- and speech-impaired citizens can dial 711. EEO/AAP services provided on a nondiscriminatory basis.

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